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Fill in this information to identify your case:			
United States Bankruptcy Court for the:			
Northern District of: Illinois (State)	<u></u>		
Case number (if known)	Chapter you are filing under:		
	✓ Chapter 7		
	Chapter 11		
	Chapter 12		Check if this is an
	Chapter 13		amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

art 1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
. Your full name	Joel	
	First name	First name
Write the name that is on		
your government-issued picture identification (for	Middle name	Middle name
example, your driver's	Thomas	
license or passport	Last name	Last name
Bring your picture		
identification to your	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
meeting with the trustee.		
All other names you	Find	Filtra
have used in the last	First name	First name
8 years	Middle name	Middle name
Include your married or	Middle name	Middle Hame
maiden names.	Last name	Last name
	Last Harro	Last Hallo
	First name	First name
	Middle name	Middle name
	Last name	Last name
. Only the last 4 digits	NO. NO.	VIV. 101
of your Social	XXX - XX- 0789	XXX - XX-
Security number or federal Individual	OR	OR
Taxpayer	9 xx - xx-	9 xx - xx-
Identification number		
(ITIN)		

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De	ebtor 1 Joel First Name	Middle Name Last Name	Case number (if known)
	Thot wante	Middle Halle	
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer	I have not used any business names or EINs.	I have not used any business names or EINs.
	Identification Numbers (EIN) you have used in the last	Business name	Business name
	8 years	Business name	Business name
	Include trade names and doing business as names	EIN	EIN
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		10444 S Sangamon St Number Street	Number Street
		Chicago Illinois 60643	
		City State Zip Code	City State Zip Code
		Cook County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number Street	Number Street
		City State Zip Code	City State Zip Code
		Oity Otate Zip Oode	Oitage Zip Code
6.	Why you are choosing this district	Check one:	Check one:
	to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. §§ 1408.)	I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

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De	ebtor 1 Joel		Thomas		Case number (if kno	own)
	First Name	Middle Name	Last Name			
Pa	Tell the Court Abo	ut Your Bankruptc	y Case			
7.	The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a b Bankruptcy (Form B Chapter 7 Chapter 11 Chapter 12 Chapter 13	orief description of each, see <i>No</i> 32010)). Also, go to the top of pa	otice Req age 1 and	uired by 11 U.S.C d check the appro	C. § 342(b) for Individuals Filing for opriate box.
8.	How you will pay the fee	more details ab cashier's check may pay with a I need to pay the lindividuals to F I request that i judge may, but the official power you choose this	cout how you may pay. Typic c, or money order. If your attomments are credit card or check with a part the fee in installments. If you pay Your Filing Fee in Install. If you may the fee be waived (You may the is not required to, waive you werty line that applies to your	cally, if your conney is some print or choose diments (Connect or request or fee, and family significantly signifi	ou are paying the submitting your ed address. e this option, sig Official Form 103 this option only ad may do so onl ize and you are u	the clerk's office in your local court for e fee yourself, you may pay with cash, payment on your behalf, your attorney in and attach the <i>Application for</i> A). If you are filing for Chapter 7. By law, a y if your income is less than 150% of unable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official
9.	Have you filed for bankruptcy within the last 8 years?	Ves. District District District		When When When	MM / DD / YYYY MM / DD / YYYY MM / DD / YYYY	Case number Case number Case number
10	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	✓ No. Yes. Debtor District Debtor District		When When	MM / DD / YYYY	Relationship to you Case number, if known Relationship to you Case number, if known
11	Do you rent your residence?	✓ No. 6	andlord obtained an eviction ju Go to line 12.			of You (Form 101A) and file it with

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Debtor 1 Joel Thomas Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance Bankruptcy Code and sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are vou a small business debtor? I am not filing under Chapter 11. For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have ✓ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have ✓ I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. The law requires that Attach a copy of the certificate and the payment plan, Attach a copy of the certificate and the payment plan, if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you plan, if any. plan, if any. are not eligible to file. I certify that I asked for credit counseling services ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: I have a mental illness or a mental I have a mental illness or a mental Incapacity. Incapacity. deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. Disability. My physical disability causes me to Disability. My physical disability causes me to be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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Thomas Debtor 1 Joel Case number (if known) Middle Name First Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do "incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded □ No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **1**-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do vou estimate that you owe? 100-199 10,001-25,000 More than 100,000 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$10,000,000,001-\$50 billion to be worth? \$100,001-\$500,000 \$50,000,001-\$100 million \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion liabilities to be? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Joel Thomas Signature of Debtor 1 Signature of Debtor 2 Executed on __4/16/2018 Executed on MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Joel		Thomas	Case number (if	known)
First Name	Middle Name	Last Name		
For your attorney, if you are represented by one	eligibility to proceed un	der Chapter 7, 11, 12	2, or 13 of title 11, United	ave informed the debtor(s) about d States Code, and have explained the also certify that I have delivered to the
If you are not	debtor(s) the notice requ	uired by 11 U.S.C. §	342(b) and, in a case in v	which § 707(b)(4)(D) applies, certify that I
represented by an				ules filed with the petition is incorrect.
attorney, you do not	•			
need to file this page.	/s/ Brittney Mansfie	ld	Date	4/16/2018
	Signature of Attorney			M / DD / YYYY
	olgitalate of historia			
	Brittney Mansfield			
	Printed name			
	0 11 5			
	Semrad Law Firm			
	Firm name			
	11101 S. Western Ave	enue		
	Street			
	-			
	Chicago		Illinois	60643
	City		State	Zip Code
	Contact phone	3124477849	Email address	bmansfield@semradlaw.com
	Bar number		State	

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Fill in this information to identify your case:							
Debtor 1	Joel		Thomas				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States E	Bankruptcy Court for the:	Northern	District of Illinois				
			(State)				
Case number (If known)							

Check if this is an
 amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B)	\$0.00
1a. Copy line 55, Total real estate, from Schedule A/B	\$730.00
1b. Copy line 62, Total personal property, from Schedule A/B	¢720.00
1c. Copy line 63, Total of all property on Schedule A/B	\$730.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	ФСОО ОО
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$628.00 ———————————————————————————————————
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$26,188.00
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$3,915.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$3,913.00
Your total liabilities	\$30,731.00
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I)	\$1,916.90
Copy your combined monthly income from line 12 of Schedule I	
Copy your combined monthly income from line 12 of Schedule I	

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Debtor 1 Joel Thomas Case number (if known) First Name Middle Name Last Name Part 4: **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. \square 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$2,627.28 Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following: **Total claim** \$26,188.00 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$26,188.00

9g. Total. Add lines 9a through 9f.

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Fill in this	information to identify your o	ase:					
Debtor 1	Joel			Thomas			
Debtor 2	First Name	Middle Na	ame	Last Name			
(Spouse, if fi	First Name	Middle Na	ame	Last Name			
United Sta	ates Bankruptcy Court for the:	Northern		District of Illinois			
Case num	ber			(State)			
Officia	I Form 106A/B						Check if this is an amended filing
Sche	dule A/B: Prope	erty					12/1
category v responsibl write your	where you think it fits best. e for supplying correct info name and case number (if	Be as complete ar mation. If more sp known). Answer ev	nd accura pace is ne very ques	et only once. If an asset fits in mor ate as possible. If two married peo eeded, attach a separate sheet to tion. her Real Estate You Own or H	ple are filing to this form. On t	ogether, both a the top of any a	are equally
1. Do you		quitable interest in	n any res	idence, building, land, or similar p	roperty?		
	No. Go to Part 2 Yes. Where is the property?						
1.1	Street address, if available, or	other description	Sing	the property? Check all that apply. le-family home lex or multi-unit building	the amo	unt of any secu	claims or exemptions. Put tred claims on Schedule D: times Secured by Property.
			Con Man	dominium or cooperative ufactured or mobile home		value of the property?	Current value of the portion you own?
	Number Street City State	Zip Code		stment property eshare	interest	t (such as fee s	f your ownership simple, tenancy by e estate), if known.
	·		one. Debt Debt	s an interest in the property? Chector 1 only tor 2 only tor 1 and Debtor 2 only tast one of the debtors and another		eck if this is co e instructions)	ommunity property
				nformation you wish to add about t	his item. such	as local	
				y identification number:			
If you	Street address, if available, or		Sing Dup	the property? Check all that apply. le-family home lex or multi-unit building dominium or cooperative ufactured or mobile home	the amo Creditor Current	unt of any secu	claims or exemptions. Put tred claims on Schedule D: aims Secured by Property. Current value of the portion you own?
	Number Street City State	Zip Code		stment property eshare	interest	t (such as fee s	f your ownership simple, tenancy by e estate), if known.
	,	,	one. Debt Debt Debt At lea	s an interest in the property? Checker 1 only tor 2 only tor 1 and Debtor 2 only ast one of the debtors and another of formation you wish to add about the identification number:	k (se	e instructions)	ommunity property

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Debtor 1			Thomas	Case number	(if known)	
	First Name M	iddle Name	Last Name			
1.3	et address, if available, or other des		at is the property? Check all that ap Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	ply.	the amount of any secu	claims or exemptions. Put red claims on Schedule D: ims Secured by Property. Current value of the portion you own?
Nur City	nber Street State Zip C	code	Investment property Timeshare Other		Describe the nature o interest (such as fee s the entireties, or a life	imple, tenancy by
		Oth	o has an interest in the property? Of Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another information you wish to add aborety identification number:	ner	Check if this is co (see instructions)	mmunity property
	the dollar value of the portion you attached for Part 1. Write tha	ou own for all	of your entries from Part 1, includi	ng any entries	for pages	_
Do you ow you own t	hat someone else drives. If you leas ins, trucks, tractors, sport utility veh	se a vehicle, als	any vehicles, whether they are re o report it on Schedule G: Executory (cles	-	-	
3.1	Make Model: Year:		Who has an interest in the proper one. Debtor 1 only	rty? Check	the amount of any secu	claims or exemptions. Put ured claims on <i>Schedule D:</i> aims Secured by Property.
	Approximate mileage: Other information:		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and a Check if this is community prinstructions)		Current value of the entire property?	Current value of the portion you own?
3.2	Make Model: Year: Approximate mileage:	<u> </u>	Who has an interest in the proper one. Debtor 1 only Debtor 2 only	rty? Check	the amount of any sectoreditors Who Have Classifications Current value of the	claims or exemptions. Put ured claims on Schedule D: aims Secured by Property. Current value of the
	Other information:		Debtor 1 and Debtor 2 only At least one of the debtors and a Check if this is community prinstructions)		entire property?	portion you own?

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ebtor 1	JUEI		Thomas Case nu	umber (if known)	
	First Name	Middle Name	Last Name		
3.3	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the property? Checone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	the amount of any sector of the control of the cont	claims or exemptions. Pur ured claims on Schedule D aims Secured by Property. Current value of the portion you own?
3.4	Make Model: Year: Approximate mileage:		who has an interest in the property? Checone. Debtor 1 only Debtor 2 only	the amount of any sector of the Contract of th	claims or exemptions. Purured claims on <i>Schedule Laims Secured by Property.</i> Current value of the
	Other information:		Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (s instructions)	entire property? ———————————————————————————————————	portion you own?
		•	recreational vehicles, other vehicles, and		
Exar		•	recreational vehicles, other vehicles, and fishing vessels, snowmobiles, motorcycle acce Who has an interest in the property? Checone.	essories eck Do not deduct secured	• • • • • • • • • • • • • • • • • • •
Exar	nples: Boats, trailers, motors, p No Yes Make	•	fishing vessels, snowmobiles, motorcycle acce Who has an interest in the property? Chec	Do not deduct secured the amount of any secured the amount of the entire property?	ured claims on <i>Schedule L</i>
Exar ✓ 4.1	nples: Boats, trailers, motors, p No Yes Make Model: Year: Approximate mileage:	•	Who has an interest in the property? Checone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Do not deduct secured the amount of any secured the entire property? See Do not deduct secured the entire property? Do not deduct secured the amount of any secured the amount of any secured the s	

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Thomas Debtor 1 Joel Case number (if known) First Name Middle Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Used cell phone, 2 used tvs, used laptop Yes. Describe... \$400.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothing** \$300.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... 13. Non-farm animals Examples: Dogs, cats, birds, horses Nο Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list **✓** No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$700.00 for Part 3. Write that number here

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Debtor 1 Joel Thomas Case number (if known) Middle Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition \$20.00 Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: 17.1. Checking account: 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: Green Dot Prepaid Card \$10.00 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ◪ No Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No Name of entity % of ownership: Yes. Give specific information about them

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Dep.	tor 1 Joel	Middle Nove	Inomas	Case number (if known)	
20.		Middle Name prate bonds and other negotiab nclude personal checks, cashiers'			
	Non-negotiable instrume	ents are those you cannot transfer	to someone by signing	or delivering them.	
	Yes. Give specific information about them	Issuer name:			
		-			
21.	Retirement or pension Examples: Interests in IF		thrift savings accounts,	or other pension or profit-sharing plans	
	✓ No	Type of account:	Institution name:		
	Yes. List each account		msutation name.		
	separately.	401(k) or similar plan:			
		Pension plan:			
		IRA:			
		Retirement account:			
		Keogh:			
		Additional account:			
		Additional account:			_
22.		prepayments I deposits you have made so that with landlords, prepaid rent, public			
	Yes	Electric:			
		Gas:			
		Heating oil:			
		Security deposit on rental unit:			
		Prepaid rent:			
		Telephone:			
		Water:			
		Rented furniture:			
		Other:			
23.	Annuities (A contract fo	r a periodic payment of money to	you, either for life or for	a number of years)	
	✓ No ☐ Yes	Issuer name and description:			
		-			-

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Debte	or 1 Joel	Thomas	Case number (if known)	
0.4	First Name	Middle Name Last Name A, in an account in a qualified ABLE program, or unc	dou o mundified atota tuition nuomuom	
24.	26 U.S.C. §§ 530(b)(1), 529A			
	No Institution nam			
25.		nterests in property (other than anything listed in lin	ne 1), and rights or powers	
	exercisable for your benefit No			
	Yes. Describe			
26.		— arks, trade secrets, and other intellectual property mes, websites, proceeds from royalties and licensing agr	reements	
	✓ No ☐ Yes. Describe			
	Tes. Describe			
27.	Licenses, franchises, and ot Examples: Building permits, ex	her general intangibles colusive licenses, cooperative association holdings, liquor	r licenses, professional licenses	
	✓ No			
	Yes. Describe			
Mon	ey or property owed to yo	ou?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	ey or property owed to you Tax refunds owed to you	ou?		portion you own? Do not deduct secured
		ou?		portion you own? Do not deduct secured
	Tax refunds owed to you ✓ No ✓ Yes. Give specific informati	ion	Federal:	portion you own? Do not deduct secured
	Tax refunds owed to you No Yes. Give specific informati about them, including you already filed the reference to the properties of the pr	ion g whether returns	Federal: State:	portion you own? Do not deduct secured claims or exemptions.
	Tax refunds owed to you No Yes. Give specific informati about them, including	ion g whether returns		portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you No Yes. Give specific informati about them, including you already filed the rand the tax years Family support	ion g whether returns	State: Local:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to you No Yes. Give specific informati about them, including you already filed the rand the tax years Family support	ion g whether returns	State: Local: e, divorce settlement, property settlemen	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to you No Yes. Give specific informati about them, including your already filed the rand the tax years Family support Examples: Past due or lump support of the	m alimony, spousal support, child support, maintenance	State: Local: e, divorce settlement, property settlemen Alimony:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t
28.	Tax refunds owed to you No Yes. Give specific informati about them, including you already filed their and the tax years Family support Examples: Past due or lump sure	m alimony, spousal support, child support, maintenance	State: Local: e, divorce settlement, property settlemen Alimony: Maintenance:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00
28.	Tax refunds owed to you No Yes. Give specific informati about them, including you already filed their and the tax years Family support Examples: Past due or lump sure	m alimony, spousal support, child support, maintenance	State: Local: e, divorce settlement, property settlemen Alimony: Maintenance: Support:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to you No Yes. Give specific informati about them, including you already filed their and the tax years Family support Examples: Past due or lump sure	m alimony, spousal support, child support, maintenance	State: Local: e, divorce settlement, property settlemen Alimony: Maintenance: Support: Divorce settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to you ✓ No Yes. Give specific information about them, including you already filed the regard the tax years Family support Examples: Past due or lump sure No Yes. Give specific information	ion g whether returns m alimony, spousal support, child support, maintenance sion	State: Local: e, divorce settlement, property settlemen Alimony: Maintenance: Support:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00
29.	Tax refunds owed to you ✓ No Yes. Give specific informati about them, including you already filed their and the tax years Family support Examples: Past due or lump surely No Yes. Give specific informati	ion g whether returns m alimony, spousal support, child support, maintenance sion	State: Local: e, divorce settlement, property settlemen Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds owed to you ✓ No Yes. Give specific informati about them, including you already filed their and the tax years Family support Examples: Past due or lump surely No Yes. Give specific informati	ion g whether returns m alimony, spousal support, child support, maintenance ion	State: Local: e, divorce settlement, property settlemen Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to you No Yes. Give specific informati about them, including you already filed the reand the tax years Family support Examples: Past due or lump sure No Yes. Give specific informati Other amounts someone owe Examples: Unpaid wages, disalt Social Security bene	ion g whether returns m alimony, spousal support, child support, maintenance ion	State: Local: e, divorce settlement, property settlemen Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00

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Debt	or 1 Joel	Thomas	Case number (if known)	
	First Name Middle Name	Last Name		
31.	Interests in insurance policies Examples: Health, disability, or life insurance; health	alth savings account (HSA); credit, ho	omeowner's, or renter's insurance	
	Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
32.	Any interest in property that is due you from If you are the beneficiary of a living trust, expect property because someone has died.		, or are currently entitled to receive	
	✓ No Yes. Describe			
33.	Claims against third parties, whether or not Examples: Accidents, employment disputes, insu		a demand for payment	
	<u></u>	claim against Lineage Logistics		
34.	Other contingent and unliquidated claims of to set off claims	every nature, including counterc	laims of the debtor and rights	
	✓ No Yes. Describe			
35.	Any financial assets you did not already list			
	Yes. Describe			
36.	Add the dollar value of all of your entries from			\$30.00
Part	5: Describe Any Business-Related Pro	perty You Own or Have an In	terest In. List any real estate in Part	1.
37.	Do you own or have any legal or equitable in No. Go to Part 6. Yes. Go to line 38.	terest in any business-related pro	Ci po Do	urrent value of the ortion you own? o not deduct secured claims rexemptions
38.	Accounts receivable or commissions you alro	eady earned		
	Yes. Describe			
39.	Office equipment, furnishings, and supplies Examples: Business-related computers, software	e, modems, printers, copiers, fax ma	chines, rugs, telephones, desks, chairs, electr	onic devices
	✓ No Yes. Describe			

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Deb	tor 1 Joel	Thomas	Case number (if known)	
1	First Name	Middle Name Last Name		
40.	Machinery, fixtures, equ	ipment, supplies you use in business, and tools	of your trade	
	✓ No			
	Yes. Describe			
41.	Inventory			
	✓ No			
	Yes. Describe			
42.	Interests in partnership	s or joint ventures		
	✓ No			
		Name of entity:	% of ownership:	
	Yes. Give specific information about			
	them	-		
				-
43. (Customer lists. mailing li	sts, or other compilations		-
	—	,		
	✓ No			
	Yes. Do your lists inc	lude personally identifiable information (as defined in	11 U.S.C. § 101(41A))?	
	☐ No			
	Yes. Describ	е		
	100. 2000115	······		
44.	Any business-related pr	operty you did not already list		
	□ No			
	No			
	Yes. Give specific information			
	information			
				_
				<u> </u>
45. A	dd the dollar value of all	of your entries from Part 5, including any entrie	s for pages you have attached	
		here		
<u> </u>	Deceribe Any For	man and Communical Fishings Boloted Duos	and Var Orm and Large on Interest in	
Part	If you own or have an in	m- and Commercial Fishing-Related Prop terest in farmland, list it in Part 1.	erty You Own or Have an Interest In.	
46.	Do you own or have any	legal or equitable interest in any farm- or comr	mercial fishing-related property?	
	No. Go to Part 7.			Current value of the
				portion you own?
	Yes. Go to line 47.			Do not deduct secured claims or exemptions
17	Farm animals			or exemplions
47.	Examples: Livestock, pour	ltry, farm-raised fish		
		•		
	✓ No			
	Yes. Describe			

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Deb	otor 1 Joei	NELU N	Inomas	Case number (if known)	
	First Name	Middle Name	Last Name		
48.	Crops-either growing	or harvested			
	✓ No				
	Yes. Describe				
	_				
10					
49.	Farm and fishing equip	oment, implements, machinery, fix	ttures, and tools of trade	•	
	✓ No				
	Yes. Describe				
50	Farm and fishing supp	lies, chemicals, and feed			
00.					
	✓ No				
	Yes. Describe				
	<u> </u>				
51.	Any farm- and comme	rcial fishing-related property you	did not already list		
	No No				
	Yes. Describe				
	-				
52. A	dd the dollar value of a	II of your entries from Part 6, inclu	iding any entries for pag	es vou have attached	1
		r here			·
•				l	
Part	7. Describe All Pro	perty You Own or Have an Int	terest in That You Did	l Not List Above	
53.		perty of any kind you did not alrea	dy list?		
	Examples: Season ticket	s, country club membership			
	✓ No				1
	Yes. Give specific				
	information				
54. A	add the dollar value of a	ll of your entries from Part 7. Write	e that number here		
Part	8: List the Totals of	Each Part of this Form			
55.	Part 1: Total real estate	, line 2		>	
	part 2 total vehicles, lin				
57.	Part 3: Total personal ar	nd household items, line 15	\$700.00	<u></u>	
58. I	Part 4: Total financial as	ssets, line 36	\$30.00		
59.	Part 5: Total business-re	elated property. line 45	******	_	
				<u> </u>	
٥υ.	rart o: lotal tarm- and	fishing-related property, line 52		_	
61.	Part 7: Total other prop	erty not listed, line 54			
62.	Total personal property	. Add lines 56 through 61	\$730.00		+ \$730.00
	-		φ/30.00	Copy personal property total ►	+ φ/ 30.00
					4700.55
63 7	Total of all property on 9	Schedule A/B. Add line 55 + line 62.			\$730.00
00.	i otal olali property oli c	70.10000 TID 1 / 100 III 00 T III 02.			1

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				Lument Page 20 01		
Fill	in this infor	mation to identify your ca	ise:			
Deb	otor 1	Joel		Thomas		
		First Name	Middle Name	Last Name		
	otor 2 ouse, if filing)					
(Spc	ruse, ir illing)	First Name	Middle Name	Last Name		
Uni	ted States E	Bankruptcy Court for the:	Northern	District of Illinois (Ctata)		
Cas	se number			(State)		
(If kr	nown)					Charl Williams
Of	ficial	Form 106C				Check if this is a amended filing
Sc	hedul	e C: The Prope	erty You Claim	as Exempt		04/1
as e add	exempt. If i itional paq	more space is needed, ges, write your name ar m of property you clain	fill out and attach to the nd case number (if known as exempt, you must	is page as many copies of Pagennia. St specify the amount of the control of the	rt 2: Additional	purce, list the property that you claim I Page as necessary. On the top of any u claim. One way of doing so is to the property being exempted up to
stat the tax- und you	amount of exempt reler a law to rexemption to the work of the work	of any applicable statured and applicable statured and applicable statured to the following status of exemptions are your of exemptions are your or status or s	utory limit. Some exen by be unlimited in dollation to a particular doll to the applicable statut Claim as Exempt	ar amount and the value of t	aim an exemp the property is	nts to receive certain benefits, and otion of 100% of fair market value is determined to exceed that amount
stat the tax- und you Par 1.	amount of exempt rereal aw to rexemption to the company of the com	of any applicable stature tirement funds—mathat limits the exemption would be limited to attify the Property You to fexemptions are you care claiming state and fectare claiming federal exemptions.	utory limit. Some exently be unlimited in dollar ion to a particular dollor the applicable status. Claim as Exempt Claiming? Check one only, deral nonbankruptcy exemptions. 11 U.S.C. § 522(ar amount. However, if you clear amount and the value of the tory amount. The even if your spouse is filing with your mptions. 11 U.S.C. § 522(b)(3) (b)(2)	aim an exempthe property is	otion of 100% of fair market value
stat the tax- und you Par	amount of exempt rereal aw to rexemption to the company of the com	of any applicable stature tirement funds—mathat limits the exemption would be limited to attify the Property You to fexemptions are you care claiming state and fectare claiming federal exemptions.	utory limit. Some exently be unlimited in dollar ion to a particular dollor the applicable status. Claim as Exempt Claiming? Check one only, deral nonbankruptcy exemptions. 11 U.S.C. § 522(ar amount. However, if you clear amount and the value of the tory amount. A even if your spouse is filing with young time.	aim an exempthe property is	otion of 100% of fair market value
stat the tax- und you Par 1.	amount of exempt rer a law to rexemption to the resemption of the resemption of the resemble to the resemble t	of any applicable stature tirement funds—mathat limits the exemption would be limited to attify the Property You to fexemptions are you care claiming state and fectare claiming federal exemptions.	utory limit. Some exently be unlimited in dollar ion to a particular dollar of the applicable status. Claim as Exempt Claiming? Check one only, deral nonbankruptcy exemptions. 11 U.S.C. § 522(dule A/B that you claim a limit of the portion you own Copy the value from the property of the postular from the postular f	ar amount. However, if you clear amount and the value of the tory amount. It even if your spouse is filing with young tions. 11 U.S.C. § 522(b)(3) b)(2) So exempt, fill in the information In the exemption you check only one box for each of the exemption.	aim an exempthe property is ou.	otion of 100% of fair market value
stat the tax- und you Par 1.	amount of exempt rer a law to rexemption to the recent to	of any applicable status retirement funds—mathat limits the exemption would be limited to attify the Property You to fexemptions are you care claiming state and fectore claiming federal exemptions of the property a	cutory limit. Some exency be unlimited in dollar ion to a particular dollar of the applicable status. Claim as Exempt Claiming? Check one only, deral nonbankruptcy exemptions. 11 U.S.C. § 522(dule A/B that you claim a country of the portion you own	ar amount. However, if you clear amount and the value of the tory amount. It even if your spouse is filing with young tions. 11 U.S.C. § 522(b)(3) b)(2) So exempt, fill in the information In the exemption you check only one box for each of the exemption.	aim an exempthe property is ou.	otion of 100% of fair market value addension of 100% of fair market value addension of the control of the contr
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stat the tax- und you Par 1.	amount of exempt rer a law to rexempt rer a law to rexemption. It 1: Iden Which ser You a For any p Brief descline on Sc property Brief description Other Greet Line from	of any applicable status tetirement funds—mathat limits the exemption would be limited to attify the Property You to fexemptions are you care claiming state and fector are claiming federal exemptions of the property you list on Scheol cription of the property acceptable A/B that lists this refinancial account, in Dot Prepaid Card	cutory limit. Some exently be unlimited in dollar ion to a particular dollar of the applicable status. Claim as Exempt Claiming? Check one only, deral nonbankruptcy exemptions. 11 U.S.C. § 522(dule A/B that you claim and Current value of the portion you own Copy the value from Schedule A/B	amount. However, if you clear amount and the value of the tory amount. Average if your spouse is filing with your protons. 11 U.S.C. § 522(b)(3) b)(2) Solve exempt, fill in the information is compared to the exemption your check only one box for each of the exemption your check of the exemption your check on the exemption your check of the exe	ou. Delow.	otion of 100% of fair market value is determined to exceed that amount of the state
stat the tax- und you Par 1.	amount of exempt rer a law to rexempt rer a law to rexempt rer a law to rexempt reresease to research to the law to the l	of any applicable status tetirement funds—mathat limits the exemption would be limited to attify the Property You to fexemptions are you care claiming state and fector are claiming federal exemptions of the property you list on Scheol cription of the property acceptable A/B that lists this refinancial account, in Dot Prepaid Card	utory limit. Some exently be unlimited in dollar ion to a particular doll to the applicable status. Claim as Exempt Claimas	amount. However, if you clear amount and the value of the tory amount. If even if your spouse is filing with your protions. 11 U.S.C. § 522(b)(3) If the body spouse is filing with your protions. 11 U.S.C. § 522(b)(3) Amount of the exemption your check only one box for each of the protection of the exemption your protection. If the body spouse is filing with your protection is several to the exemption your protection. If the protection is a several to the protection is several to the protection is a several to the pro	ou. Delow. D	Specific laws that allow exemption 735 ILCS 5/12-1001(b)

No Yes

✓ No

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

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Thomas Debtor 1 Joel Case number (if known) First Name Middle Name Last Name **Additional Page** Part 2: Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(b) \$400.00 description: \checkmark \$400.00 Used cell phone, 2 used 100% of fair market value, up to any tvs, used laptop applicable statutory limit Line from 07 Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$20.00 description: **✓** \$20.00 Cash on Hand 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 16 820 ILCS 305/21 \$0.00 description: $\overline{}$ \$0 Worker's Compensation 100% of fair market value, up to any claim against Lineage applicable statutory limit Logistics Line from

Schedule A/B:

33

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		DC	cument Page 22 of	03		
Fill in this	information to identify your ca	se:				
Debtor 1	Joel		Thomas			
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if f	iling) First Name	Middle Name	Last Name			
United St	ates Bankruptcy Court for the:	Northern	District of Illinois			
			(State)			
Case nun (If known)	nber		_			
Offici	ial Form 106D			_		Check if this is a
-		ore Who Ha	ve Claims Secure	ad by Prop		3
			e are filing together, both are equ			12/1
1. Do	I case number (if known). any creditors have claims so No. Check this box and subm Yes. Fill in all of the information	ecured by your proper	nber the entries, and attach it to t ty? with your other schedules. You hav			es, write your
Part 1:	List All Secured Claims					
se in	·	nan one creditor has a par	cured claim, list the creditor ticular claim, list the other creditors order according to the creditor's	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 IR		Describe the property	that secures the claim:	\$628.00	\$730.00	\$0.00
	editor's Name D Box 7346	All Real and Personal P				
	Number Street		, the claim is: Check all that apply.			
_		Contingent				
_	iladelphia PA 19101	Unliquidated				
Cit	y State ZIP Code no owes the debt? Check one.	Disputed				
\[\sqrt{2}	Debtor 1 only	Nature of lien. Check	all that apply.			
	Debtor 2 only	An agreement you car loan)	made (such as mortgage or secured			
<u> </u>	Debtor 1 and Debtor 2 only	_ ′	as tax lien, mechanic's lien)			
L	At least one of the debtors and another	Judgment lien from	n a lawsuit			
	Check if this claim relates to a community debt	Other (including a r	ight to offset)			
	ite debt was	Last 4 digits of accou	nt number			

Add the dollar value of your entries in Column A on this page. Write that number

here:

\$628.00

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Debtor 1	Joel		Thomas	Case number (if known)
	First Name	Middle Name	Last Name	
Part 2:	List Others to Be No	otified for a Debt T	hat You Already Listed	
agency Similar	y is trying to collect fro ly, if you have more that	om you for a debt you on an one creditor for an	owe to someone else, list	or a debt that you already listed in Part 1. For example, if a collection the creditor in Part 1, and then list the collection agency here. ted in Part 1, list the additional creditors here. If you do not have omit this page.
Nam 118	k County Reg Chicago ne N Clark St # 120 nber Street			On which line in Part 1 did you enter the creditor? 2.1 Last 4 digits of account number
Chic City	cago	Illinois State	60602 Zip Code	

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			D	ocument	Paye 24 01	03			
Fill in	this infor	mation to identify your ca	ase:			Ī			
Debto	r 1	Joel First Name	Middle Name	Thomas Last Nam	<u></u>				
Debto (Spouse	r 2 e, if filing)	First Name	Middle Name	Last Nam					
United	States B	ankruptcy Court for the:	Northern	District of Illing					
Case i	number n)			(Stat					
Offic	cial F	orm 106E/F				_	Chec	k if this is an	amended filing
Scl	nedu	ıle E/F: Cre	ditors Who	Have U	nsecure	d Claims	6		12/15
claims the en known Part i	that are tries in t). List	and on Schedule G: Exe listed in Schedule D: C he boxes on the left. At	reditors Who Hold Clai each the Continuation Unsecured Claims	ms Secured by Pro Page to this page.	perty. If more spa	ace is needed, cop	οy the Part yοι	ı need, fill it	out, number
2. L	Yes. ist all of sted, ider as much a continuat	your priority unsecured that type of claim it is as possible, list the claims ion Page of Part 1. If more planation of each type of	I claims. If a creditor has s. If a claim has both pri in alphabetical order acc e than one creditor holds	s more than one pric ority and nonpriority cording to the credito a particular claim, lis	amounts, list that or's name. If you has st the other creditor	claim here and show ave more than two rs in Part 3.	w both priority	and nonpriori	ty amounts.
,						,	Total claim	Priority amount	Nonpriority amount
2.1	509 S 6 Number	Creditor's Name TH ST Street		Last 4 digits of a When was the de As of the date yo apply.	_	8900 1/2012 s: Check all that		\$26,188.00	
	✓ Deb	FIELD Illinois State surred the debt? Check of tor 1 only tor 2 only	Zip Code one.	Contingent Unliquidated Disputed	V				
	느	tor 1 and Debtor 2 only			Y unsecured clair port obligations	π:			
	At le	east one of the debtors an	d another	Taxes and cer	rtain other debts yo	ou owe the			
		ck if this claim relates	to a community debt		ath or personal inju	ry while you were			
	Is the cl	aim subject to offset?		intoxicated Other. Specify					

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Debte	or 1 Joel	Thomas	Case number (if known)
	First Name Middle Name	Last Name	
Part	List All of Your NONPRIORITY Unsecure	ed Claims	
]	Oo any creditors have nonpriority unsecured claim No. You have nothing to report in this part. Sub ✓ Yes.	omit this form to the court w	
l I	insecured claim, list the creditor separately for each cla	im. For each claim listed, iden	creditor who holds each claim. If a creditor has more than one priority ntify what type of claim it is. Do not list claims already included in Part 1. You have more than four priority unsecured claims fill out the Continuation
			Total claim
4.1	CAPITALONE	Last 4 di	igits of account number1827\$3,638.00
	Nonpriority Creditor's Name c/o Pollack & Rosen, P.C	When wa	as the debt incurred? 10/2015
	Number Street 1825 Barrett Lakes Blvd Suite 510 Kennesaw Georgia 30	Cont Code	NONPRIORITY unsecured claim: dent loans gations arising out of a separation agreement or ree that you did not report as priority claims ts to pension or profit-sharing plans, and other similar
4.2	CONVERGENT OUTSOURCING Nonpriority Creditor's Name 10750 HAMMERLY BLVD #200 Number Street	When wa	igits of account number 1585 \$277.00 as the debt incurred? 12/2016 as date you file, the claim is: Check all that apply.
		Code Unliq	
	Debtor 2 only	_	NONPRIORITY unsecured claim: dent loans
	Debtor 1 and Debtor 2 only At least one of the debtors and another	Oblig	gations arising out of a separation agreement or rece that you did not report as priority claims
	Check if this claim relates to a community of	ebt Debts	ts to pension or profit-sharing plans, and other similar is
	Is the claim subject to offset? ✓ No	✓	001 Collection; Collecting for ORIGINAL CREDITOR:

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Debtor 1 Joel Thomas Case number (if known)
First Name Middle Name Last Name

Part 4: Add th	ne Amounts for Each Type of Unsecured Claim			
6. Total the a	mounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim.	s for s	tatistical reporting purposes onl	y. 28 U.S.C. §
			Total claims	
Total claims from Part 1	6a. Domestic support obligations.	6a.	\$26,188.00	
	6b. Taxes and certain other debts you owe the government	6b.	\$0.00	
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00	
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$0.00	
	6e. Total. Add lines 6a through 6d.	6e.	\$26,188.00	
			Total claims	
Total claims from Part 2	6f. Student loans	6f.	\$0.00	
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00	
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00	
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$3,915.00	
	6j. Total. Add lines 6f through 6i.	6j.	\$3,915.00	

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Debtor 1	Joel		Thomas	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)	
Case number			, ,	

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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			D	στητική ταξ	JC 20 01	00
Fill in	this infor	mation to identify your	case:			
Debte	or 1	Joel		Thomas		
		First Name	Middle Name	Last Name		
Debte (Spous	or 2 se, if filing)	First Name	Middle Name	Last Name		
Unite	ed States E	sankruptcy Court for the	: Northern	District of Illinois		
				(State)	-	
(If know	number wn)					
						Check if this is an
~ · ·		T 40011				amended filing
Off	iciai	Form 106H				
Scł	nedul	e H: Your Co	debtors			12/15
1. [Do you ha ✓ No Yes		you are filing a joint case, do	·		
	daho, Lou		exico, Puerto Rico, Texas, W	• •	- `	nity property states and territories include Arizona, California,
l i			ner spouse, or legal equiva	alent live with you at the	e time?	
		No				
		Yes. In which commur	ity state or territory did yo	u live?	Fill in	the name and current address of that person.
		Name of your spouse,	former spouse, or legal equ	iivalent		
		Number Street				
		City	State	Zip (Code	
á	again as a	codebtor only if that	person is a guarantor or o	osigner. Make sure yo	ou have liste	ouse is filing with you. List the person shown in line 2 and the creditor on Schedule D (Official Form 106D), Schedule E/F, or Schedule G to fill out Column 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

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Debtor 1 Joe First Name Middle Name Last Name Last Name Debtor 2 Secose, if fluids First Name Middle Name Last Name Last Name Check if this is: Check if this is: An amended filing		20	odinone	1 ago 20	0.00	
Debtor 2 Sponse, of fillings First Name Middle Name Last Name Las	Fill in this information to identify	y your case:				
Debtor 2 Sponse, of fillings First Name Middle Name Last Name Las	Debtor 1 Joel		Thoma	as		
Debtor 2 Spouse, if fine) First Name		Middle Name			- Che	eck if this is:
Unlied State Barkruptcy Court for the: Case number (State) A supplement showing post-petition chapter oxperses as of the following date:						
Official Form 106l Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If you are separated and not filing spouse have more than one job, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment information about additional employees. Occupation Employed Semployed State Separate speed with information about additional employees. Occupation Employer's name Employer's address Employer's address Include part time, seasonal, or self-amployed work. Occupation Employed State Tip Code Chry State Tip Code How long employed there? Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. 2. List monthly gress wages, salary, and commissions (before all payou) 2. \$2, \$2,742.13 to 1. \$2,742.13 t	(Spouse, it filing) First Name	Middle Name	Last N	lame		Ğ
Official Form 106l Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If wo are separated and your spouse is not filing with you, do not include information about your spouse. If wo are separated and your spouse is not filing with you, do not include information about your spouse. If wo are separated and your spouse is not filing with you, do not include information and your spouse. If wo are separated and your spouse is not filing with you, include information and your spouse. If wo have more than one job, attach a separate page with information about additional pages, write your name and case number (if known). Answer every question. Bemployment status Employment status Employer is address Debtor 1 Debtor 2 Employed Not Employed Invine Employer's address 17311 You Karman, Suite 400 Number Street Number Street Number Street Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 1 For Debtor 2 For Debtor 2 Non-filing spouse 1	the:	Northern				
Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Occupation Benjoyed Debtor 1 Debtor 2 Employed Debtor 2 Employed Debtor 2 Employed Debtor 2 Debtor 2 Debtor 2 Debtor 2 Debtor 3 Debtor 4 Debtor 5 Debtor 5 Debtor 6 Debtor 7 Debtor 8 Debtor 9 Deb					-	MM / DD / YYYY
Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filling with you, do not include information about your spouse. If more space is needed, attach a separated and your spouse is not filling with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employed. Pocupation Employed status Cocupation Employer's name Employer's address 1/2 I 1 Von Kaman, Suite 400 Number Streat Number Streat Number Streat Number Streat Number Streat Number Streat Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filling spouse unless you are separate sheet to this form. For Debtor 1 For Debtor 2 For Debtor 2 For Debtor 2 or non-filling spouse 1. Estimate and list monthly calculate what the monthly wage would be. 2. List monthly gross wages, salary, and commissions (before all payon) to be such as payonate and the monthly wage would be.	Official Form 106I					
responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Part 2: Give Details About Monthly Income Employed Town the street How long employed there? Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 City State Zip Code Town state Zip Code Tow	Schedule I: Your Ir	ncome				12/1
If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation Employer's name Employer's address Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Invine California 92614 City State Zip Code How long employed there? Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. Estimate and list monthly overtime pay. 3.	information about your spouse. spouse. If more space is neede number (if known). Answer eve	If you are separated an d, attach a separate she ry question.	d your spous	se is not filing	with you, do	not include information about your
If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation Employer's name Employer's name Employer's address Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Invine			Debtor 1			Debtor 2
attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Invine California 92614 City State Zip Code		Employment status	✓ Emplo	oyed		Employed
Include part time, seasonal, or self-employer's name Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Invine	1			-		
Self-employed work. Occupation may include student or homemaker, if it applies. Invine California 92614 City State Zip Code City State Zip Code	information about additional	Occupation	_			
Occupation may include student or homemaker, if it applies. Irvine California 92614 City State Zip Code City State Zip Code	1	Employer's name	Lineage L	ogistics, LLC		_
Irvine California 92614 City State Zip Code How long employed there? Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. +\$0.00		Employer's address	17911 Vo	n Karman, Suite	100	
City State Zip Code Thou long employed there? City State Zip Code City State Zip Code City State Zip Code Total City State Zip Code Total City State Zip Code Code City State Zip Code Code City State Zip Code Code City State Zip Code Code City State Zip Code Code City State Zip Code Code Code Code Code Code Code Code	,		Number St	reet		Number Street
City State Zip Code Thou long employed there? City State Zip Code City State Zip Code City State Zip Code Total City State Zip Code Total City State Zip Code Code City State Zip Code Code City State Zip Code Code City State Zip Code Code City State Zip Code Code Code Code Code Code Code Code						
How long employed there? Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. + \$0.00			Irvine	California	92614	
Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. +\$0.00			City	State	Zip Code	City State Zip Code
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. + \$0.00		•	7 months			
spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. + \$0.00	Part 2: Give Details About	Monthly Income				
If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse		the date you file this for	n. If you have	nothing to repor	t for any line, v	write \$0 in the space. Include your non-filing
For Debtor 1 List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. For Debtor 1 2. \$2,742.13	If you or your non-filing spouse have		, combine the	information for a	ıll employers fo	or that person on the lines below. If you need
2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 2. \$2,742.13	more space, attach a separate sh	eet to this form.		For D	ebtor 1	
	deductions.) If not paid monthl			2.	\$2,742.13	non-ming spouse
4. Calculate gross income. Add line 2 + line 3. 4. \$2,742.13	3. Estimate and list monthly over	ertime pay.		3.	+ \$0.00	
	4. Calculate gross income. Add	line 2 + line 3.		4.	\$2,742.13	

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Deb	tor 1Joel	Middle Neme	I homas		Case number	er <i>(if</i>		
	First Name	Middle Name	Last Name		known) For Debtor 1	For Debtor 2 or non-filing spouse		
C	opy line 4 here		→	4.	\$2,742.13		•	
	st all payroll deductions							
		ocial Security deductions		5a.	\$203.84			
5	b. Mandatory contributi	ions for retirement plans		5b.	\$0.00			
	c. Voluntary contributio	·		5c.	\$0.00			
5	d. Required repayments	s of retirement fund Ioans		5d.	\$0.00			
5	e. Insurance			5e.	\$116.39			
5	f. Domestic support obl	igations		5f.	\$520.00			
	g. Union dues			5g.	\$0.00			
	•	pecify:		5h. +	\$0.00	·		
	dd the payroll deduction	ns. Add lines 5a + 5b + 5c + 5d + 5e +5		6.	\$840.23			
7. C a	alculate total monthly t	ake-home pay. Subtract line 6 from line	e 4.	7.	\$1,901.90			
8. Li	st all other income regu	ularly received:						
8	business, profession,							
	gross receipts, ordinary	each property and business showing and necessary business expenses, and	t					
	the total monthly net in			8a.	\$0.00			
	b. Interest and dividend			8b.	\$0.00			
8	dependent regularly							
	Include alimony, spous divorce settlement, and	sal support, child support, maintenance, I property settlement.		8c.	\$0.00			
8	d. Unemployment comp	pensation		8d.	\$0.00			
8	e. Social Security			8e.	\$0.00			
8	Include cash assistance cash assistance that yo	sistance that you regularly receive and the value (if known) of any non- u receive, such as food stamps (benefits al Nutrition Assistance Program) or		8f.	\$15.00			
8	g. Pension or retiremen	nt income		8g.	\$0.00			
8	h. Other monthly incom	ne. Specify:		8h. +	\$0.00	+		
9. A d	dd all other income Add	l lines 8a + 8b + 8c + 8d + 8e + 8f +8g	+ 8h.	9.	\$15.00			
	calculate monthly incomed the entries in line 10 for	ne. Add line 7 + line 9. or Debtor 1 and Debtor 2 or non-filing s		10.	\$1,916.90	+	=	\$1,916.90
Ir fr	nclude contributions from iends or relatives.	contributions to the expenses that you an unmarried partner, members of your ts already included in lines 2-10 or amo	r househol	d, your	dependents, your room	,		
	pecify:	,			, 19 1 p 111000		11. +	\$0.00
_								
		ast column of line 10 to the amount i Summary of Schedules and Statistical Su					12.	\$1,916.90
								Combined monthly income
13. [Oo you expect an increa	se or decrease within the year after	you file th	nis form	?			
֓֡֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	≒							
L	Yes. Explain:							
	1							

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		Doc	ument Page 31 of 6	3		
Fill in this infor	mation to identify	your case:				
Debtor 1	Joel		Thomas			
Debtor 2	First Name	Middle Name	Last Name	Check if this is:		
(Spouse, if filing)	First Name	Middle Name	Last Name	An amended filin	g	
	Bankruptcy Court	or the: Northern	District of Illinois (State)	A supplement she expenses as of t		petition chapter 13 date:
Case number (If known)	-		-	MM / DD / YYYY	,	
Official	Form 10	6J				
Schedul	e J: Your	 Expenses				12/15
information. If (if known). Ans	more space is ne wer every questi					
	cribe Your Hou	usehold				
1. Is this a joi						
	to line 2	:				
Yes. D	_	in a separate household?				
_ L	No Dili o					
		must file Official Forms 106J-2, Expe	enses for Separate Household of Deb	tor 2.		
	e dependents?	No Sill and the first of the sill of the s				
Do not list D Debtor 2.	eptor i and	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does depe with you?	endent live
			Child	10 years	✓ No.	
					Yes.	
	enses include f people other	✓ No				
than yourself and	d vour	Yes				
dependents	-	<u> </u>				
Part 2: Esti	mate Your Ong	joing Monthly Expenses				
	of a date after th	your bankruptcy filing date unless e bankruptcy is filed. If this is a su				
	•	non-cash government assistance uded it on Schedule I: Your Incom	•			Your expenses
	or home owners	ship expenses for your residence. It. 4.	Include first mortgage payments and		4.	\$500.00
	uded in line 4:					
	state taxes	or renter's insurance			4a	\$0.00
4D. Probe	tv. Homeowner's	OF TELLER STRIBUTATION			1h	ፍለ ሰለ

\$0.00

\$0.00

4c.

4d.

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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Debtor 1 Joel Thomas Case number (if known)
First Name Middle Name Last Name

First Name	Middle Name Last Name		
			Your expenses
5. Additional mortgage payme	ents for your residence, such as home equity loans	5.	\$0.00
6. Utilities:			
6a. Electricity, heat, natural g	as	6a.	\$100.00
6b. Water, sewer, garbage co	pllection	6b.	\$50.00
6c. Telephone, cell phone, Ir	nternet, satellite, and cable services	6c.	\$80.00
6d. Other. Specify:		6d	\$0.00
7. Food and housekeeping su	pplies	7.	\$600.00
8. Childcare and children's ed	ducation costs	8.	\$0.00
9. Clothing, laundry, and dry	cleaning	9.	\$130.00
10. Personal care products a	nd services	10.	\$65.00
11. Medical and dental expen	ses	11.	\$50.00
12. Transportation. Include ga	is, maintenance, bus or train fare.	12.	\$300.00
13. Entertainment, clubs, rec	reation, newspapers, magazines, and books	13.	\$0.00
14. Charitable contributions a	and religious donations	14.	\$50.00
15. Insurance. Do not include insurance dec	ducted from your pay or included in lines 4 or 20.		
15a. Life insurance		15a	\$0.00
15b. Health insurance		15b	\$0.00
15c. Vehicle insurance		15c	\$0.00
15d. Other insurance. Specif	y:	15d	\$0.00
16. Taxes. Do not include taxes	s deducted from your pay or included in lines 4 or 20.		
Specify:		16	\$0.00
17. Installment or lease paym	nents:	10	
17a. Car payments for Vehic	le 1	17a	\$0.00
17b. Car payments for Vehic	le 2	17b	\$0.00
17c. Other. Specify:		17c	\$0.00
17d. Other. Specify:		17d	\$0.00
	, maintenance, and support that you did not report as deducted from		\$0.00
, , ,	ule I, Your Income (Official Form 106I).	18.	
Specify:	to support others who do not live with you.	10	Ф0.00
	ses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	19.	\$0.00
20a. Mortgages on other pro		20a	\$0.00
20b. Real estate taxes.		20b	\$0.00
20c. Property, homeowner's	, or renter's insurance	20c	\$0.00
20d. Maintenance, repair, an		20d	\$0.00
20e. Homeowner's associati		20e	\$0.00
		200	

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Debtor 1			Thomas	Case number (if known)		
	First Name	Middle Name	Last Name			
21.Other	Specify:				21	\$0.00
00 0-1	.1.4	hh				
	ulate your mont	• •				\$1,925.00
	Add lines 4 throu	9				\$0.00
		onthly expenses for Debtor 2), if any				\$1,925.00
		22b. The result is your monthly ex	penses.		22.	
23.Calcu	late your montl	nly net income.				
23a. C	Copy line 12 (you	r combined monthly income) from	Schedule I.		23a	\$1,916.90
23b. (Copy your month	nly expenses from line 22 above.			23b	\$1,925.00
		nthly expenses from your monthly	income.			(\$8.10)
-	The result is your	monthly net income.			23c	
mort		expect to finish paying for your car increase or decrease because of a				
_	Explain Pays cl	here: nild support and son lives with him	when he is on breaks from	school		

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Fill in this information to identify your case:									
Debtor 1	Joel		Thomas						
	First Name	Middle Name	Last Name	_					
Debtor 2									
(Spouse, if filing)	First Name	Middle Name	Last Name	_					
United States E	Bankruptcy Court for the:	Northern	District of Illinois						
			(State)						
Case number (If known)				_					

Official Form 106Dec

П	Check if this is an
	amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t 1: Sign Below							
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?								
	✓ No							
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).						
	Under penalty of perjury, I declare that I have read the summary a	and schedules filed with this declaration and						
	that they are true and correct.							
×	/s/ Joel Thomas	×						
	Signature of Debtor 1	Signature of Debtor 2						
	Date 4/16/2018	Date						
	MM/DD/YYYY	MM/DD/YYYY						

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Fill i	n this info	rmation to identify your o	ase:					
Deb	tor 1	Joel		Thomas				
Date	10	First Name	Middle N	lame Last Nam	ne			
	tor 2 use, if filing)	First Name	Middle N	lame Last Nam	ie			
Unit	ed States I	Bankruptcy Court for the:	Northern	District of Illino				
	e number			(Sta	te)			
(If kno	own)							Check if this is a
Of	ficial	Form 107						amended filing
Sta	ateme	nt of Financia	l Affairs f	or Individuals	Filing for	Bankru	ıptcy	04/1
info	rmation.		ed, attach a sepa	arried people are filing arate sheet to this form				
Pari	Give	e Details About Your	Marital Status	and Where You Lived	Before			
1.	What is	your current marital st	atus?					
		ırried						
	✓ No	t married						
2.	During 1	the last 3 years, have yo	ou lived anywhere	other than where you li	ve now?			
	✓ No Yes		ou lived in the last	3 years. Do not include	where you live r	ow.		
	Del	btor 1:		Dates Debtor 1 lived there	Debtor 2:			Dates Debtor 2 lived there
					Same as	Debtor 1		Same as Debtor 1
	Nu	mber Street	_	From	Number Stre	et		From
				То	-			To
	City	y State	Zip Code		City	State	Zip Code	
		,	p			Debtor 1	p 2000	Same as Debtor 1
					_			_
	Nu	mber Street		From	Number Stre	et		From
				То				То
	City	y State	Zip Code		City	State	Zip Code	
3.	and territo	<i>pries</i> include Arizona, Califo	ornia, Idaho, Louis	ouse or legal equivalent iana, Nevada, New Mexico Codebtors (Official Form	, Puerto Rico, Te		- '	

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Thomas Debtor 1 Joel Case number (if known) Middle Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and (before deductions and Check all that apply. exclusions) exclusions) Wages, $\overline{\mathbf{A}}$ \$10000.00 Wages, From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, Wages, \$15000.00 For last calendar year: commissions, commissions, (January 1 to December 31, 2017 bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, \$7500.00 For the calendar year before that: commissions, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips YYYY Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Sources of income Gross income from Gross income from Describe below. each source Describe below. each source (before deductions (before deductions and and exclusions) exclusions) Est LINK \$60.00 From January 1 of current year until the date you filed for bankruptcy: Est LINK \$1,152.00 For last calendar year: (January 1 to December 31, 2017 Est LINK \$2,304.00 For the calendar year before that: (January 1 to December 31, 2016

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Debtor 1 Joel Thomas Case number (if known) Middle Name Last Name Part 3: List Certain Payments You Made Before You Filed for Bankruptcy 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Amount you still owe Was this payment Dates of payment Total amount paid for Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Number Street Credit card Loan repayment Citv Suppliers or State 7in Code vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Suppliers or Zip Code vendors

Other

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siders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; reporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing gent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, ich as child support and alimony. No Yes. List all payments to an insider. Dates of payment Total amount paid Amount you still owe Reason for this payment	1	Joel			Tho	omas	Case number	(if known)
Pes. List all payments to an insider. Dates of payment		First Name		Middle Name	Last	t Name		
Pes. List all payments to an insider. Dates of payment paid amount still owe Reason for this payment still owe Reason for this payment still owe Reason for this payment still owe Reason for this payment still owe Reason for this payment still owe Reason for this payment still owe Reason for this payment still owe Reason for this payment still owe Reason for this payment still owe Reason for this payment still owe Reason for this payment still owe Reason for this payment still owe Reason for this payment still owe Reason for this payment still owe Reason for this payment still owe Reason for this payment still owe Reason for this payment paid still owe Reason for this payment payment still owe Reason for this payment still owe Reason for this payment still owe Reason for this payment payment still owe Reason for this payment payment still owe Reason for this payment payment still owe	nsi orp ge	ders include your porations of which nt, including one	relatives; a you are a for a busin	ny general partners n officer, director, p ess you operate as	; relatives of any operson in control,	general partners; part or owner of 20% or	nerships of which y more of their voting	ou are a general partner; g securities; and any managing
Total amount you still owe Dates of payment Dates of payment Paid Namount you still owe Reason for this payment	✓	No						
Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? notude payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of payment paid Insider's Name Number Street City State Zip Code Insider's Name Number Street Number Street Number Street	Ħ	Yes. List all pay	ments to a	an insider.				
Number Street City State Zip Code	_							Reason for this payment
City State Zip Code Insider's Name Number Street		Insider's Name						
Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? nclude payments on debts guaranteed or cosigned by an insider. ✓ No Yes. List all payments that benefited an insider. Dates of payment Dates of payment Paid Total amount you still owe Insider's Name Number Street Insider's Name Number Street		Number Street						
Number Street City State Zip Code	_	City	State	Zip Code				
City State Zip Code		Insider's Name						
Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of payment Dates of payment Dates of payment Insider's Name Number Street City State Zip Code Insider's Name Number Street		Number Street						
Yes. List all payments that benefited an insider. Dates of payment Total amount paid Amount you still owe Reason for this payment Include creditor's name		City	State	Zip Code				
Insider's Name Number Street City State Zip Code Insider's Name Number Street		ude payments on		_	der.		-	
Number Street City State Zip Code Insider's Name Number Street		Incidente Nove						Include creditor's name
City State Zip Code Insider's Name Number Street		insider's Name						
Insider's Name Number Street		Number Street						
Number Street	_	City	State	Zip Code				
		Insider's Name						
City State Zin Code		moider 5 Name						

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Thomas Debtor 1 Joel Case number (if known) Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Nature of the case Status of the case Court or agency Case title Worker's Compensation Pending First Municipal District Of Cook County Joel Thomas v. Lineage Logistics On appeal Court Name Case number 50 W Washington St Concluded NumberStreet Chicago Illinois 60602 City State Zip Code Case title First Municipal District Of Cook County Pending On appeal Court Name Case number 50 W Washington St Concluded 2017-M1-121132 NumberStreet 60602 Illinois Chicago City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Describe the property Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Value of the Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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Debt	tor 1 Joel		Thomas	Case number (if known)	
	First Name	Middle Name	Last Name		
11.		re you filed for bankruptcy, did o make a payment because yo		ank or financial institution, set off any ar	nounts from your
	✓ No ✓ Yes. Fill in the de	etails.			
			Describe the action the	e creditor took Date actio was taken	n Amount
	Creditor's Name				_
	Number Street				
			Last 4 digits of account r	number: XXXX-	
	City	State Zip Code			
12.		you filed for bankruptcy, was a a custodian, or another official		possession of an assignee for the benefit	of creditors, a court-
	✓ No				
	Yes				
Part	t 5: List Certain Gi	fts and Contributions			
13.	Within 2 years before	re you filed for bankruptcy, did	you give any gifts with a to	otal value of more than \$600 per person?	
	✓ No Yes. Fill in the d	letails for each gift.			
	Gifts with a tota per person	al value of more than \$600	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom	You Gave the Gift			
	Number Street				
	City	State Zip Code			
	Person's relations	ship to you			
	Person to Whom	You Gave the Gift			
	Number Street				
	City	State Zip Code			
	Person's relations	ship to you			

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	Joel	Thomas	Case number (if know	VII)	
	First Name Middle Name	Last Name	<u> </u>		
. Wit	hin 2 years before you filed for bankrupto	y, did you give any gifts or contributi	ons with a total value	of more than \$600	to any charity?
	No				
✓	No				
	Yes. Fill in the details for each gift or cont	ribution.			
_	Gifts or contributions to charities	Describe what you contrib	ıtad	Data you	Value
	that total more than \$600	Describe what you contribe	iteu	Date you contributed	value
	that total more than \$000			Contributed	
	Charity's Name				
	•				
	Ni walang Churat				
	Number Street				
	City State Zip Code				
rt 6:	List Certain Losses				
. Wit	hin 1 year before you filed for bankruptcy	or since you filed for bankruptcy, did	l vou lose anything bed	cause of theft, fire.	other disaster, or
	nbling?	,,	,	,	,
✓	No				
一	Yes. Fill in the details.				
ш					
	Describe the property you lost and	Describe any insurance co		Date of your	Value of property
	how the loss occurred	Include the amount that insu		loss	lost
		pending insurance claims on	line 33 of <i>Schedule</i>		
		A/B: Property.			
rt 7:	List Certain Payments or Transfers				
	out seeking bankruptcy or preparing a ban ude any attorneys, bankruptcy petition prepar				anyone you consulted
	out seeking bankruptcy or preparing a ban	kruptcy petition?			anyone you consulted
	out seeking bankruptcy or preparing a bar ude any attorneys, bankruptcy petition prepar	kruptcy petition?			anyone you consulted
	out seeking bankruptcy or preparing a ban ude any attorneys, bankruptcy petition prepar No	skruptcy petition? ers, or credit counseling agencies for se	rvices required in your b	ankruptcy.	
	out seeking bankruptcy or preparing a ban ude any attorneys, bankruptcy petition prepar No	kruptcy petition? ers, or credit counseling agencies for se Description and value of an	rvices required in your b	ankruptcy. Date payment	Amount of
	out seeking bankruptcy or preparing a ban ude any attorneys, bankruptcy petition prepar No	skruptcy petition? ers, or credit counseling agencies for se	rvices required in your b	ankruptcy. Date payment or transfer	
	out seeking bankruptcy or preparing a ban ude any attorneys, bankruptcy petition prepar No Yes. Fill in the details.	Personal description and value of an transferred	rvices required in your b	Date payment or transfer was made	Amount of payment
	out seeking bankruptcy or preparing a ban ude any attorneys, bankruptcy petition prepar No Yes. Fill in the details. Semrad Law Firm	kruptcy petition? ers, or credit counseling agencies for se Description and value of an	rvices required in your b	ankruptcy. Date payment or transfer	Amount of
	out seeking bankruptcy or preparing a ban ude any attorneys, bankruptcy petition prepar No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid	Personal description and value of an transferred	rvices required in your b	Date payment or transfer was made	Amount of payment
	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue	Personal description and value of an transferred	rvices required in your b	Date payment or transfer was made	Amount of payment
	out seeking bankruptcy or preparing a ban ude any attorneys, bankruptcy petition prepar No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid	Personal description and value of an transferred	rvices required in your b	Date payment or transfer was made	Amount of payment
	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue	Personal description and value of an transferred	rvices required in your b	Date payment or transfer was made	Amount of payment
	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue	Personal description and value of an transferred	rvices required in your b	Date payment or transfer was made	Amount of payment
	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue	Personal description and value of an transferred	rvices required in your b	Date payment or transfer was made	Amount of payment
	No No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street	Description and value of an transferred Attorney's Fee - 0.00	rvices required in your b	Date payment or transfer was made	Amount of payment
	No No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643	Description and value of an transferred Attorney's Fee - 0.00	rvices required in your b	Date payment or transfer was made	Amount of payment
	No No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643	Description and value of an transferred Attorney's Fee - 0.00	rvices required in your b	Date payment or transfer was made	Amount of payment
	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None	Description and value of an transferred Attorney's Fee - 0.00	rvices required in your b	Date payment or transfer was made	Amount of payment
	No Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code	Description and value of an transferred Attorney's Fee - 0.00	rvices required in your b	Date payment or transfer was made	Amount of payment
	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None	Description and value of an transferred Attorney's Fee - 0.00	rvices required in your b	Date payment or transfer was made	Amount of payment
	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None Person Who Made the Payment, if Not You	Description and value of an transferred Attorney's Fee - 0.00	rvices required in your b	Date payment or transfer was made	Amount of payment
	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None	Description and value of an transferred Attorney's Fee - 0.00	rvices required in your b	Date payment or transfer was made	Amount of payment
	Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None Person Who Mas Paid	Description and value of an transferred Attorney's Fee - 0.00	rvices required in your b	Date payment or transfer was made	Amount of payment
	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None Person Who Made the Payment, if Not You	Description and value of an transferred Attorney's Fee - 0.00	rvices required in your b	Date payment or transfer was made	Amount of payment
	Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None Person Who Mas Paid	Description and value of an transferred Attorney's Fee - 0.00	rvices required in your b	Date payment or transfer was made	Amount of payment
	Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None Person Who Mas Paid	Description and value of an transferred Attorney's Fee - 0.00	rvices required in your b	Date payment or transfer was made	Amount of payment
	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None Person Who Made the Payment, if Not You Person Who Was Paid	Description and value of an transferred Attorney's Fee - 0.00	rvices required in your b	Date payment or transfer was made	Amount of payment
	Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None Person Who Mas Paid	Description and value of an transferred Attorney's Fee - 0.00	rvices required in your b	Date payment or transfer was made	Amount of payment
	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None Person Who Made the Payment, if Not You Person Who Was Paid In the details.	Description and value of an transferred Attorney's Fee - 0.00	rvices required in your b	Date payment or transfer was made	Amount of payment
	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None Person Who Made the Payment, if Not You Person Who Was Paid	Description and value of an transferred Attorney's Fee - 0.00	rvices required in your b	Date payment or transfer was made	Amount of payment
	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None Person Who Made the Payment, if Not You Person Who Was Paid In the details.	Description and value of an transferred Attorney's Fee - 0.00	rvices required in your b	Date payment or transfer was made	Amount of payment

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Debtor	1 Joel		Thomas Cas	e number <i>(if known)</i>	
	First Name	Middle Name	Last Name		
he	elp you deal with your cre o not include any payment No	ditors or to make paym		if pay or transfer any property to	anyone who promised to
L	Yes. Fill in the details.				
			Description and value of any prope transferred	rty Date payment or transfer was made	Amount of payment
	Person Who Was Paid			-	
	Number Street	_			
	City State	e Zip Code			
	No Yes. Fill in the details.		Description and value of property transferred	Describe any property or payments received or debts in exchange	Date transfer was made
	Person Who Received T	ransfer			
	Number Street				
	City State Person's relationship to				
	Person Who Received T	ransfer			
	Number Street				
	City State Person's relationship to	•			
be	eneficiary? hese are often called asset-		d you transfer any property to a self-set	tled trust or similar device of w	hich you are a
	1 . co. i in in alle details.		Description and value of the prop	erty transferred	Date transfer was made
	Name of trust				

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Debtor 1 Joel Thomas Case number (if known) Middle Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance number instrument account was before closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other Zip Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code State Zip Code 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Yes Number Street Number Street Citv State 7in Code

City

State

Zip Code

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Thomas Debtor 1 Joel Case number (if known) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. **✓** No Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code State Zip Code **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Date of Environmental law, if you know it notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code Zip Code State 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code City State Zip Code

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Deb	tor 1				Thomas		Case number	(if known)	
		First Name		Middle Name	Last Name				
26.	Hav	e you been a party	/ in any judic	ial or administi	rative proceeding	under any envi	ronmental law? I	nclude settlements and orde	ers.
		No Yes. Fill in the det	ails.						
					Court or agency		Nature	of the case	Status of the case
		Case title			Court Name				Pending
		Case number			NumberStreet				On appeal
					City Sta	ate Zip Co	de		Concluded
Part	11:	Give Details Ab	out Your B	usiness or Co	onnections to Ar	ny Business			•
27.	Witl	nin 4 years before	you filed for	bankruptcy, dic	d you own a busine	ess or have any	of the following	connections to any business	9.
		A sole propri	etor or self-e	mployed in a tra	ade, profession, or	other activity,	either full-time or	part-time	
		A member of A partner in a			LC) or limited liab	ility partnership	(LLP)		
		ш .			e of a corporation	1			
		An owner of a	at least 5% o	f the voting or e	equity securities of	a corporation			
		No. None of the a							
	✓	Yes. Check all tha	at apply abov	e and till in the	details below for e	eacn business. e nature of the	business	Employer Identification n	umber Do not
		Colf Employed						include Social Security n	
		Self Employed Business Name			Lawn Care			EIN:	
		Unknown Number Street			_				
		Chicago Heights City	Illinois State	60411 Zip Code	Name of acc	countant or bo	okkeeper	Dates business existed	
								From To	
					Describe the	e nature of the	business	Employer Identification n include Social Security n	
		Business Name			_			EIN:	
		Number Street			_			Dates business existed	
		City	State	Zip Code	Name of acc	countant or bo	okkeeper	From To	
		·		·					
					Describe the	e nature of the	business	Employer Identification n include Social Security n	
		Business Name			_			EIN:	
		Number Street			Name of acc	countant or bo	okkeener	Dates business existed	
		City	State	Zip Code		community of bo		From To	

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Deb	tor 1 Joel			Thomas	Case number (if known)
	First Name		Middle Name	Last Name	
28.	creditors, or	rs before you filed for other parties. in the details below.	or bankruptcy, did yo	u give a financial statement	to anyone about your business? Include all financial institutions,
		iii ti le details below.			
				Date issued	
	Name			MM/DD/YYYY	
	INAITIE			, = =,	
	Numbe	r Street		-	
	City	State	Zip Code	-	
Part	12: Sign B	elow			
t	true and corre a bankruptcy	ect. I understand tha	it making a false stat	ement, concealing property or imprisonment for up to 20	its, and I declare under penalty of perjury that the answers are y, or obtaining money or property by fraud in connection with years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	•	/s/ Joel Inoma			<u></u>
		Signature of Debto	or 1		Signature of Debtor 2
		Date 4/16/2018			Date
[✓ No Yes	n additional pages to		Financial Affairs for Individu orney to help you fill out ba	als Filing for Bankruptcy (Official Form 107)?
[✓ No				
	Yes. Nam	e of person			Attach the Bankruptcy Petition Preparer's Notice,

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Fill in this information to identify your case:						
Debtor 1	Joel		Thomas			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		Northern	District of Illinois			
Case number			(State)			

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1.	For any creditors that you listed in Part 1 of Schedule D: Creditors information below.	s Who Have Claims Secured by Property (Official Fori	n 106D), fill in the
	Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
	Creditor's name: IRS Description of property securing debt: Secured by All real and personal property	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	No. ✓ Yes.
	Creditor's name: Description of property securing debt:	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	No. Yes.
	Creditor's name: Description of property securing debt:	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	No. Yes.
	Creditor's name: Description of property securing debt:	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and	No. Yes.

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Debto	r Joel		Thomas	Case number (if	
1	First Name	Middle Name	Last Name	known)	
Part 2:	List Your Unexpired	Personal Property Lease	es		
inform	ation below. Do not list re		leases are leases that	y Contracts and Unexpired Leases (Offic are still in effect; the lease period has r U.S.C. § 365(p)(2).	
De	escribe your unexpired pe	rsonal property leases		Will the lease b	pe assumed?
Le	essor's name:			☐ No ☐ Yes	
	escription of leased operty:				
Le	essor's name:			☐ No ☐ Yes	
	escription of leased operty:				
Le	essor's name:			☐ No ☐ Yes	
	escription of leased operty:				
Le	essor's name:			☐ No ☐ Yes	
	escription of leased operty:				
Le	essor's name:			☐ No ☐ Yes	
	escription of leased operty:				
Le	essor's name:			☐ No ☐ Yes	
	escription of leased operty:				
Le	essor's name:			☐ No ☐ Yes	
	escription of leased operty:				
Part 3	Sign Below				
Und			ny intention about any	property of my estate that secures a de	bt and any personal
4.4			4.4		
_	/s/ Joel Thomas Signature of Debtor 1		★ Sie	gnature of Debtor 2	
	Date 4/16/2018 MM/DD/YYYY			ate MM/DD/YYYY	

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

		Northern Distri	ct of Illinois	
n re	Joel Thomas		Case No.	
	Debtor			(If known)
			Chapter	Chapter 7
D	ISCLOSURE OF	COMPENSATIO	N OF ATTORNE	Y FOR DEBTOR
compe	nsation paid to me within or	ne year before the filing of the	petition in bankruptcy, or agi	he abovenamed debtor(s) and that reed to be paid to me, for services th the bankruptcy case is as follows:
For leg	al services, I have agreed to	accept		\$1,500.00
Prior to	the filing of this statement	I have received		\$0.00
Balance	e Due			\$1,500.00
2. The so	urce of the compensation pa	aid to me was:		
	✓ Debtor	Other (specify)		
3. The so	urce of the compensation pa	aid to me is:		
	✓ Debtor	Other (specify)		
4. I ha	ave not agreed to share the a embers and associates of my	above-disclosed compensatio v law firm.	n with any other person unle	ess they are
Ш me		ve-disclosed compensation wi aw firm. A copy of the agreem pensation, is attached.		
5. In retur	n for the above-disclosed fe	ee, I have agreed to render lega	al service for all aspects of the	e bankruptcy case, including:
	Analysis of the debtor's fina bankruptcy;	ancial situation, and rendering	advice to the debtor in deter	mining whether to file a petition in
b.	Preparation and filing of an	y petition, schedules, stateme	nts of affairs and plan which	may be required;
C.	Representation of the debto	or at the meeting of creditors a	and confirmation hearing, and	d any adjourned hearings thereof;
6. By agre	eement with the debtor(s), th	ne above-disclosed fee does no	ot include the following servi	ces:
		CERTIFIC	ATION	
	hat the foregoing is a complicities bankruptcy proceedings		nt or arrangement for payme	nt to me for representation of the
	4/16/2018		/s/ Brittney Mansfield	I
	Date	-	Signature of Attorney	
			Semrad Law Firm	
			Name of law firm	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1.717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$275	total fee
+	\$75	administrative fee
	\$200	filing fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans.
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc approved.html

In Alabama and North Carolina, go to:
http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Thomas, Joel Debtor(s)	Case No	
	268.67(6)	Chapter.	Chapter7
	VERIFI	CATION OF CREDITOR MAT	RIX
Th knowledge	•	fy that the attached list of creditors is tru	ue and correct to the best of their
Date:	4/16/2018	/s/ Thomas, Joel	
		Thomas, Joel Signature of Debi	tor

ILLINOIS DCFS c/o: Cheryl Ruth 100 S Grand Ave East Springfield, IL, 62762

CAPITALONE c/o Pollack & Rosen, P.C 1825 Barrett Lakes Blvd Suite 510 Kennesaw, GA, 30144

CONVERGENT OUTSOURCING 10750 HAMMERLY BLVD #200 Houston, TX, 77043

IRS Irs Mail Stop 4100 P-3 Kansas City, MO, 64999

Cook County Reg Chicago 118 N Clark St # 120 Chicago, IL, 60602

CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1500.00 attorney fees plus any necessary post-petition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr. Adding additional bills \$31.00 Motion to Reopen and Avoid Lien \$1000.00 Motion to Reopen \$350.00 + court costs

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments;

or

2. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: 04/16/2018	
Client Joel / Lines	
Client	
Ollett	
Attorney Attorney	

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Debtor 1 Joel First Name	Thomas Middle Name Last Nar		(if known)		
	estions for Reporting Purposes	iie			
16. What kind of debts do you have?	16a. Are your debts primarily cons "incurred by an individual prim No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily busin	arily for a personal, family, or l ness debts? Business debts a ment or through the operatior	re debts that you incurred to obtain of the business or investment.		
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid that funds		npt property is excluded and administrative nsecured creditors?		
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000		
19. How much do you estimate your assets to be worth?		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	on \$10,000,000,001-\$50 billion		
20. How much do you estimate your liabilities to be?		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 mil	on \$10,000,000,001-\$50 billion		
Part 7: Sign Below	11				
For you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.				
	/s/ Joel Thomas Jack // Signature of Debtor 1	Sign	ature of Debtor 2		
	Executed on 4/16/2018 MM / DD / YY	Exe	cuted on		

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Debtor 1	Joel		Thomas	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	Northern	District of Illinois	
			(State)	
Case number (If known)				

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Part 1: Sign Below						
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?						
✓ No						
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).					
Under penalty of perjury, I declare that I have read the summary that they are true and correct.	and schedules filed with this declaration and					
/s/ Joel Thomas Signature of Debtor	Signature of Debtor 2					
Date 4/16/2018 MM/DD/YYYY	Date MM/DD/YYYY					

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Debtor			Thomas	Case number (if known)
	First Name	Middle Name	Last Name	
CI	reditors, or other parties.	led for bankruptcy, did y	ou give a financial state	ment to anyone about your business? Include all financial institutions,
Ľ	Yes. Fill in the details be	elow.		
			Date issued	
	Name		MM/DD/YYYY	_
	Number Street		_	
	City Sta	te Zip Code	_	
Part 12	2: Sign Below			
true	e and correct. I understan	d that making a false sta	tement, concealing pro	ments, and I declare under penalty of perjury that the answers are perty, or obtaining money or property by fraud in connection with to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	/s/ Joel T		homes	*
	Signature of	Debtor 1		Signature of Debtor 2
	Date 4/16/2	018		Date
Did	you attach additional pag	ges to Your Statement of	Financial Affairs for Ind	ividuals Filing for Bankruptcy (Official Form 107)?
	No Yes			
Did	you pay or agree to pay s	omeone who is not an a	torney to help you fill o	ut bankruptcy forms?
\checkmark	No			
	Yes. Name of person			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Debtor	r Joel		Thomas	Case number (if
1	First Name	Middle Name	Last Name	known)
Part 2:	List Your Unexpir	ed Personal Property Leas	es	
informa	ation below. Do not li		l leases are leases that	y Contracts and Unexpired Leases (Official Form 106G), fill in the are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2).
De	escribe your unexpire	d personal property leases		Will the lease be assumed?
Les	ssor's name:			No Yes
	escription of leased operty:			, _
Le	ssor's name:			□ No □ Yes
	escription of leased operty:			_
Le	essor's name:			□ No □ Yes
	escription of leased operty:			_
Le	essor's name:			□ No □ Yes
	escription of leased operty:			
Le	essor's name:			□ No □ Yes
	escription of leased operty:			
Le	essor's name:			□ No □ Yes
	escription of leased operty:			
Le	essor's name:			☐ No ☐ Yes
	escription of leased operty:			_
Part 3:	Sign Below			
Und	der penalty of perjury	I declare that I have indicated to an unexpired lease.	my intention about an	y property of my estate that secures a debt and any personal
	io 35)	1110		
-	/s/ Joel Thomas	Josel Manas	_ x _s	ignature of Debtor 2
ſ	Date 4/16/2018 MM/DD/YYYY		D	ate MM/DD/YYYY

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

III le	Debtor(s)	Case No
		Chapter. Chapter7
	VEF	ICATION OF CREDITOR MATRIX
Th knowledge		rify that the attached list of creditors is true and correct to the best of their
Date:	4/16/2018	/s/ Thomas, Joel Thomas, Joel Signature of Debtor

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Debtor 1	Joel First Name	Middle Name	Thomas Last Name		Case number	(if known)			
	Thornane	Widdle Name	Last Name		Column A Debtor 1		Column B Debtor 2 or non-filing spouse	,	
Do no		on u contend that the amount nstead, list it here:		\$	50.00			_	
-	ou	***************************************	\$0.00						
	our spouse	rcccccco	\$0.00						
benef	it under the Social Securi			\$	0.00			-	
amou paym intern	nt. Do not include any b ents received as a victim	ces not listed above. Specenefits received under the soft a war crime, a crime agairsm. If necessary, list other	Social Security Act or ainst humanity, or						
Other	Government Assistance			\$	315.00			_	
Total	amounts from separate p	pages, if any.		+	-\$0.00		+	_	
				Г		1 [_=	
11. Cale each	culate your total curre	nt monthly income. Add I	ines 2 through 10 for		2,627.28	+	BARRETT AND A ST.	_ _	\$2,627.28
	umn. Then add the total	for Column A to the total for	or Column B.] [
									Total current
Part 2:	Determine Whether	r the Means Test App	lies to You						monthly income
The second		thly income for the year							
		nonthly income from line 1	The second secon			Copy line	11 here →		\$2,627.28
	Multiply by 12 (the numl	per of months in a year).							X 12
12b.	The result is your annual	income for this part of the	form.				12	b.	\$31,527.36
13 Calcu	late the median family	income that applies to	you. Follow these steps:						
Fill in	the state in which you liv	/e.	Illinois	in and the second					
Fill in	the number of people in	your household	2						
				overen.					
Fill in house		e for your state and size of	***************************************		omania de la contraction de la		241744211422114A	13.	\$68,687.00
		lian income amounts, go d list may also be available a			separate				
	do the lines compare?								
14a.	Line 12b is less than Go to Part 3.	or equal to line 13. On the	e top of page 1, check b	ox 1, There	is no presumpt	ion of ab	use.		
14b.	Line 12b is more that Go to Part 3 and fill	an line 13. On the top of pa out Form 122A-2.	age 1, check box 2, The	presumptio	n of abuse is d	etermined	by Form 122A-2.		
Part 3:	Sign Below								
By s	igning here, I declare und	der penalty of perjury that t	he information on this st	tatement and	d in any attachr	nents is tr	rue and correct.		
×	/s/ Joel Thomas	of Mones		×					
_	Signature of Debtor 1	the flowing			e of Debtor 2				
_	4/4-4-4-4								
	Date 4/16/2018 MM/DD/YYYY			Date 4/ M	16/2018 M/DD/YYYY				
		NOT fill out or file Form 1 out Form 122A-2 and file						Windowski (State	